7/698539 5/27/00 1/2 7 8

EXPRESS MAIL CERTIFICATE

Date Label 46 2 8 2 23 6 8 4 US I hereby certify that, on the date indicated above I deposited this paper or fee with the U.S. Postal Service & that it was addressed for delivery to the Assistant Commissioner for Detects Mashington, DC 20231 by "Express Mail Post of the Label 1997 and 1997

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DARBY & DARBY P.C.

805 Third Avenue New York, New York 10022 212-527-7700

Docket No: 3391/0G232

Box PATENT APPLICATION
Assistant Commissioner for Patents
Washington, DC 20231

Sir:

Enclosed please find an application for United States patent as identified below:

Inventor/s (name ALL inventors): Guy REINA

<u>Title</u>: METHOD AND DEVICE FOR COMPUTING ECHO-CANCELLATION COEFFICIENT USING FFT

including the items indicated:

- 1. Specification and 10 claims: 1 indep.; 9 dep.; multiple dep.
- 2. [] Executed declaration and power of attorney
 - [] Unexecuted declaration and power of attorney
- [] Formal drawings, _ sheets (Figs.)
 [X] Informal drawings, _5 sheets (Figs. 1-5)
- 4. [] Assignment for recording to:
- 5. [] Verified Statement Claiming Small Entity Status

- 5. [] Verified Statement Claiming Small Entity Status
- 6. [] Check in amount of \$.00, (\$ filing; \$ recording) (See attached **Fee Computation Sheet**)
- 7. [] Preliminary Amendment
- 8. [] Information Disclosure Statement
- 9. [] Please amend the description by inserting the following paragraph after the line containing the title on page 1:"This patent application claims the priority of U.S. provisional patent application No. 60/, which is incorporated herein by reference."

Priority is claimed for this application, corresponding application/s having been filed as follows:

Country: Number: Date:

Dutc.

The priority documents

- [] are enclosed
- [] will follow.

Date: October 26, 2000

Respectfully submitted,

Walt Thomas Zielinski

Reg. No. 18,902

Attorney for Applicant(s)

Docket No.: 3391/0G232

PATENT FEE COMPUTATION SHEET

	No. of Claims Pre- sented	Extra Claims Pre- viously Paid For	Number of Extra Claims	Rate
Basic Fee				\$710.00
Total Claims	10 - 20	- 0 =	x \$18.00	\$.00
Independent Claims	1 - 3	- 0 =	x \$80.00	\$.00
Multiple Depen	dent Claims	- if so, add	\$270.00	\$0.00
Surcharge for late submission of filing fee and/or \$0.00 declaration (\$130.00)				
SUBTOTAL				\$710.00
[] Small Entity REDUCTION (Half of Subtotal)				\$.00
Fee for record	ation of ass	ignment (\$40.	00)	\$0.00
Charge for fil (\$130.00)	ing non-Engl		application	\$0.00
TOTAL				\$710.00